



Serial No.: 10/709,556

Our File No.: 10008.3858

**CERTIFICATE OF MAILING**

I HEREBY CERTIFY that the following correspondence: Amendment Transmittal Letter (in Duplicate); Amendment; Terminal Disclaimer to Obviate a Double Patenting Rejection over a "Prior" Patent; a Check in the Amount of \$65.00 for the required fee for the Terminal Disclaimer; and a Return Postcard for confirmation of receipt is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Mail Stop Fee Amendment, Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450, on **this 21st day of October, 2005.**

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further, that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment or both, under Section 1001 of Title 18 of the United States Code.

Any additional charges, including extension of time, please bill our Account No. 13-1130.

  
Arlette J. Breakstone / Paralegal

Date: October 21, 2005

**MALIN, HALEY & DiMAGGIO, P.A.**  
**Customer No. 22235**  
**1936 South Andrews Avenue**  
**Fort Lauderdale, Florida 33316**  
**(954) 763-3303**

In re Application of  
Serial No  
Filed  
For



ANDERSON, Michael R.  
10/709,556  
May 13, 2004

**DISPENSING CAPSULE FOR A LIQUID CONTAINER**

Mail Stop Non-Fee Amendment  
Commissioner for Patents  
Alexandria, VA 22313-1450

**AMENDMENT TRANSMITTAL LETTER**

Sir:

- ☒ Transmitted herewith is an amendment in the above-identified application.
- ☒ Small entity status of this application under 37 CFR 1.9 and 1.27 has been established by a statement previously submitted.
- ☒ No additional fee is required.

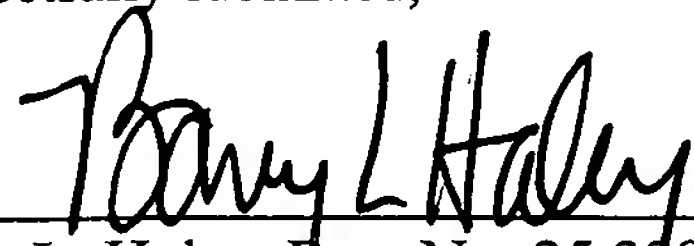
The fee has been calculated as shown below:

(Col. 1)		(Col. 2)		(Col. 3)	SMALL ENTITY		OR	OTHER THAN A SMALL ENTITY	
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PAID FOR	PRESENT EXTRA	RATE	ADDIT. FEE		RATE	ADDIT. FEE
TOTAL	* 16	MINUS	** 20	= 0	x\$ 9	\$		x\$18	\$
INDEP	* 2	MINUS	*** 3	= 0	x\$42	\$		x\$84	\$
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM					x\$140	\$		X\$280	\$
					TOTAL ADDIT. FEE	\$	OR		\$

- ☐ Please charge our Deposit Account No. 13-1130 in the amount of \$. A duplicate copy of this sheet is attached.
- ☐ A Request for a One-Month Extension of Time together with a check in the amount of \$55.00 for the fee is attached.
- ☒ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 13-1130. A duplicate copy of this sheet is attached.
- ☒ Any filing fees under 37 CFR 1.16 for the presentation of extra claims.
- ☐ Any patent application processing fees under 37 CFR 1.17.
- ☒ If there are any additional charges, including extensions of time, please bill our Deposit Account No. 13-1130.

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Respectfully submitted,

  
Barry L. Haley, Reg. No. 25,339

CLIENT NO. 22235